

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Welch et al.
 Serial No.: 09/889,645
 Filed: January 24, 2002
 For: TREATING PROTEIN-CONTAINING LIQUIDS

Confirmation No. 8639
 Group Art Unit: 1648
 Examiner: Agnieszka Boesen

Date: September 18, 2006

Mail Stop AF
 Commissioner for Patents
 Post Office Box 1450
 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an AMENDMENT in the above-identified patent application.

- ☐ Applicant claims small entity status. See 37 CFR §1.27.
☐ No additional fee is required.
☒ The fee has been calculated as shown below:

(COL. 1)		(COL. 2)	(COL. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	RATE	ADDIT. FEE	OR RATE	ADDIT. FEE
Total	22	26	= 0	x 25=	\$	x 50=	\$.00
Indep	6	5	= 1	x100=	\$	x200=	\$ 200.00
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+180=	\$	+360=	\$
				Total Add. Fee \$		OR Total	\$200.00

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

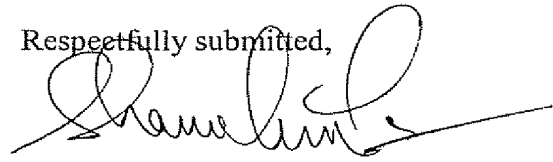
☒ Please charge my Deposit Account No. 50-0220 in the amount of \$ 200.00 for one additional independent claim.

☐ A check in the amount \$ _____ to cover _____ is enclosed.

☒ The Commissioner is hereby authorized to charge the appropriate fees associated with this communication or credit any overpayment to Deposit Account No. 50-0220.

In re: Welch et al.
Serial No.: 09/889,645
Filed: January 24, 2002
Page 2

Respectfully submitted,



Shawna Cannon Lemon
Registration No. 53,888

USPTO Customer No. 20792

Myers Bigel Sibley & Sajovec, P.A.
P. O. Box 37428, Raleigh, NC 27627
Telephone: (919) 854-1400
Facsimile: (919) 854-1401

**CERTIFICATION OF TRANSMISSION
UNDER 37 CFR § 1.8**

I hereby certify that this correspondence is being transmitted electronically to the U.S. Patent and Trademark Office on September 18, 2006 using the EFS:

Signature: Sarah Abraham Date: September 18, 2006
Typed Name of Person Signing Certificate: Sarah Abraham